

GREEN VALLEY BIBLE CAMP

2018 REQUEST FOR CAMBERSHIP

EXPECTATION OF CONFIDENTIALITY: REQUEST FOR CAMBERSHIP—WHETHER APPROVED OR DENIED—WILL BE KEPT CONFIDENTIAL BETWEEN PARENT/GUARDIAN, INDIVIDUAL REQUESTING THE CAMBERSHIP (IF DIFFERENT THAN PARENT/GUARDIAN), AND THE REGISTRAR.

Place an "X" by the session camper wants to attend.

Overnight Camp (\$120 fee; campers age 11 by Oct. 1 of this year thru 2018 High School graduates)							
<input type="checkbox"/>	1	6/3 – 6/9	Todd Miller, Bentonville, AR	<input type="checkbox"/>	6	7/8 – 7/14	Marshall Brown, Bentonville, AR
<input type="checkbox"/>	2	6/10 – 6/16	Danny Boggs, Neosho, MO	<input type="checkbox"/>	7	7/15 – 7/21	Bill McFarland, Springfield, MO
<input type="checkbox"/>	3	6/17 – 6/23	Robb Hadley, Farmington, AR	<input type="checkbox"/>	8	7/22 – 7/28	Jon Hendrix, Harrison, AR & Bob Deffenbaugh, Cassville, MO
<input type="checkbox"/>	4	6/24 – 6/30	Jason Sparks, Watauga, TX	<input type="checkbox"/>	9	7/29 – 8/4	Scott Ware, Springdale, AR
<input type="checkbox"/>	5	7/1 – 7/7	Craig Frost, Clarksville, AR				

Day Camp (\$60 fee; campers who have completed first grade thru 11 years old)							
<input type="checkbox"/>	1	6/11 – 6/14	Dennis Coberley, Pineville, MO	<input type="checkbox"/>	3	7/16 – 7/19	Matt Wilson, Fayetteville, AR
<input type="checkbox"/>	2	7/2 – 7/5	Craig Frost, Clarksville, AR	<input type="checkbox"/>	4	7/30 – 8/2	Scott Ware, Springdale, AR

High School Retreat (\$40 fee; campers who attend high school)	
<input type="checkbox"/>	1 8/17 – 8/19 Andy Brazle, Rogers, AR

CAMPER INFORMATION

Camper Name	Gender	Age	Next School Grade	Rec'd Camperships Before?	Previous Camperships Portion of Cost Covered (check)	What Portion of This Year's Cost Can Family Cover? (fees above)
	M F			Y N What Year(s)?	___ Less than 1/2 ___ 1/2 or more ___ All	___ None ___ Less than 1/2 ___ 1/2 or more but not all
	M F			Y N What Year(s)?	___ Less than 1/2 ___ 1/2 or more ___ All	___ None ___ Less than 1/2 ___ 1/2 or more but not all

PARENT/GUARDIAN INFORMATION

Parent/Guardian Names: _____ Parent/Guardian E-mail: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

CAMBERSHIP REQUESTED BY

Print Name: _____ Phone: _____ Email: _____

Relationship to Camper: ___ Parent/Guardian ___ Minister ___ Camp Director ___ Church Member ___ Other: _____

Please briefly explain why you are requesting Campership: _____

SUBMITTING CAMBERSHIP

SCAN/SEND/EMAIL or FAX completed Request for Campership form AND a completed 2018 GVBC Application for each child.

SCAN/SEND/EMAIL: registrar@greenvalleybiblecamp.com

FAX: 866-289-6146 ATTN: Registrar

REGISTRAR ONLY:

Campership approved? Y or N Partial Amt: _____ Full Amt: _____ Notes: